FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000028057 (4)**

1. Corporation Name

FRUTIMEX, INC.

Principal Place of Business	Mailing Address
3760 S.W. 82 AVENUE MIAMI FL 33155	3760 S.W. 82 AVENUE MIAMI FL 33155

3. Date Incorporated or Qualified: 04/06/1995

3a. Date of Last Report:

2. Principal Place of Business
21 9600 N.W. 25th Street
Suite, Apt. #, etc.
22 Suite 4C
City & State
23 Miami, Florida
Zip / Country
24 / 25

2a. Mailing Address
26 701 Brickell Ave.
Suite, Apt. #, etc.
27 Suite 3000
City & State
28 Miami, Florida
Zip / Country
29 33131 / 30

4. FEI Number: 65-0566966 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ROS, MARIA V
3760 S.W. 82 AVENUE
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name: INTRASTATE REGISTERED AGENT CORPORATION
82 Street Address (P.O. Box Number is Not Acceptable): 701 Brickell Avenue Suite 3000
83
84 City: Miami FL 85 Zip Code: 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Intrastate Registered Agent Corporation

SIGNATURE: Steven H. Hagen, Vice President DATE:

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	ROS, MARIA V	
STREET ADDRESS	3760 S.W. 82 AVENUE	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☒ Change ☐ Addition
1.2 NAME	Mr. Edson Cury Silva	
1.3 STREET ADDRESS	9600 N.W. 25th Street Suite 4C	
1.4 CITY-ST-ZIP	Miami, Florida	
2.1 TITLE	PST	☒ Change ☐ Addition
2.2 NAME	Mr. Edson Cury Silva	
2.3 STREET ADDRESS	9600 N.W. 25th Street Suite 4C	
2.4 CITY-ST-ZIP	Miami, Florida	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 5-17-96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE

CR2E034 (12/95)